

# Employment Application City of Heath



Return completed form to:  
City of Heath  
1287 Hebron Road  
Heath, Ohio 43056  
740/522.1420

City of Progress \* Citizens with Pride

Position applying for: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Street/Apt # City/State/Zip

Are you a Heath resident?  Yes  No If yes, how long? \_\_\_\_\_

Telephone #: Home (\_\_\_\_\_) \_\_\_\_\_ Alternate: (\_\_\_\_\_) \_\_\_\_\_

Last 4 digits of Social Security #: \_\_\_\_\_ Email: \_\_\_\_\_

Do you have legal authorization to work in the United States?  Yes  No

Do you have relatives currently employed by the City of Heath?  Yes  No

If yes, who? \_\_\_\_\_ Relationship: \_\_\_\_\_

Do you have a valid Ohio Driver's License?  Yes  No If yes, DL# \_\_\_\_\_

## **Military Service Information**

Branch of Service: \_\_\_\_\_ Type of Separation: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Highest Rank Achieved \_\_\_\_\_ Job Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Reserve or National Guard Status: \_\_\_\_\_

## **Employment History**

Account for all time for the past ten (10) years, including periods of unemployment. You MUST indicate the name used if it is different than the signature on this application. Begin with your present position or occupation. If you need more room, use a separate sheet of paper. A resume is both welcomed and urged in addition to completion of this application. It will become an official part of this application.

A. Company Name \_\_\_\_\_  
Company Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_  
Employment date from: month \_\_\_\_\_ year \_\_\_\_\_ to month \_\_\_\_\_ year \_\_\_\_\_  
Salary: \$ \_\_\_\_\_ per  hour  month  year  
Your Title: \_\_\_\_\_ Your Duties: \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ May we contact:  Yes  No  
\_\_\_\_\_

B. Company Name \_\_\_\_\_  
Company Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_  
Employment date from: month \_\_\_\_\_ year \_\_\_\_\_ to month \_\_\_\_\_ year \_\_\_\_\_  
Salary: \$ \_\_\_\_\_ per  hour  month  year  
Your Title: \_\_\_\_\_ Your Duties: \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ May we contact:  Yes  No  
\_\_\_\_\_

C. Company Name \_\_\_\_\_  
Company Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_  
Employment date from: month \_\_\_\_\_ year \_\_\_\_\_ to month \_\_\_\_\_ year \_\_\_\_\_  
Salary: \$ \_\_\_\_\_ per  hour  month  year  
Your Title: \_\_\_\_\_ Your Duties: \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ May we contact:  Yes  No  
\_\_\_\_\_

D. Company Name \_\_\_\_\_  
Company Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_  
Employment date from: month \_\_\_\_\_ year \_\_\_\_\_ to month \_\_\_\_\_ year \_\_\_\_\_  
Salary: \$ \_\_\_\_\_ per  hour  month  year  
Your Title: \_\_\_\_\_ Your Duties: \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ May we contact:  Yes  No  
\_\_\_\_\_

**Education**

Circle highest grade of school completed: 1 2 3 4 5 6 7 8 9 10 11 12 Post Secondary

	Dates attended	Did you graduate? Yes or no	Course of Study	Degrees, credits earned, other awards
High School: _____ Address: _____ City, State, Zip _____				

College: _____ Address: _____ City, State, Zip _____				
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**Special Licenses**

Current special licenses (i.e. boiler operator, teacher, chauffeur, etc): \_\_\_\_\_

Ohio Commercial Driver's License:  Yes  No If yes, DL# \_\_\_\_\_

Other: \_\_\_\_\_ State: \_\_\_\_\_ License #: \_\_\_\_\_

**References**

Do *not* list relatives or past employers previously listed in "Employment History".

Name	Address	Daytime Telephone Number
1. _____ Street Address _____ City, State, Zip _____		( ) - _____
2. _____ Street Address _____ City, State, Zip _____		( ) - _____
3. _____ Street Address _____ City, State, Zip _____		( ) - _____

Please list any additional knowledge, skills, and abilities not previously discussed which may be of a qualifying nature or helpful to you in establishing your eligibility. Include any projects, hobbies, community or volunteer activities, etc.

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**Attention: Read the following statement before signing this document**

As an applicant for employment with the City of Heath, Ohio, I understand and agree that the City may make a thorough investigation of my past employment and activities. This may include, but is not limited to, a motor vehicle operator's license inquiry and police investigation. I understand the Heath Police Department has a strict tattoo/piercing policy. I hereby release you, your organization, or others from any liability or damages, which may result from exchange of the information requested.

I also certify that all statements contained herein or at any step of the employment process are true, complete, and correct to the best of my knowledge. I understand a false answer may be grounds for dismissal from employment of the City of Heath.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***An Equal Opportunity/Affirmative Action Employer***